



House of Representatives

General Assembly

File No. 185

January Session, 2015

Substitute House Bill No. 5541

House of Representatives, March 24, 2015

The Committee on Aging reported through REP. SERRA of the 33rd Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

AN ACT CONCERNING A PILOT PROGRAM FOR INTERIM CARE FACILITIES.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (NEW) (*Effective July 1, 2015*) (a) For purposes of this
2 section, (1) "elderly person" has the same meaning as provided in
3 section 17b-450 of the general statutes, (2) "interim care facility" means
4 a facility that provides access to medical care, prepared meals and
5 assistance with household tasks in a homelike setting for elderly
6 persons who may have medical conditions that make it difficult for
7 them to live alone but who do not require twenty-four-hour skilled
8 nursing supervision, and (3) "homelike setting" means a living
9 arrangement that provides a private residential unit with a full
10 bathroom.

11 (b) The Commissioner of Social Services may, within available
12 appropriations, establish and operate a pilot program to support the
13 development of one or more interim care facilities by an institution
14 licensed pursuant to chapter 368v of the general statutes for not more

15 than one hundred elderly persons who require access to medical care,
 16 prepared meals and assistance with household tasks but who do not
 17 require twenty-four-hour skilled nursing supervision.

18 (c) The commissioner shall give priority in funding to any interim
 19 care facility proposal that facilitates the strategic plan for long-term
 20 care pursuant to subsection (c) of section 17b-369 of the general
 21 statutes. The commissioner may seek any available federal funding to
 22 support the development of an interim care facility, including, but not
 23 limited to, applying for a Medicaid waiver pursuant to section 17b-8 of
 24 the general statutes.

25 (d) Not later than July 1, 2016, the Commissioner of Social Services
 26 shall submit a report on the pilot program, in accordance with the
 27 provisions of section 11-4a of the general statutes, to the joint standing
 28 committees of the General Assembly having cognizance of matters
 29 relating to aging, public health, human services and appropriations
 30 and the budgets of state agencies.

This act shall take effect as follows and shall amend the following sections:		
Section 1	July 1, 2015	New section

Statement of Legislative Commissioners:

In Section 1(b), "entity" was changed to "institution" and "an institutional level of care" was changed to "twenty-four-hour skilled nursing supervision" for consistency with provisions of the general statutes and internal consistency.

AGE *Joint Favorable Subst. -LCO*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact:

Agency Affected	Fund-Effect	FY 16 \$	FY 17 \$
Social Services, Dept.	GF - Potential Cost	See Below	See Below

Municipal Impact: None

Explanation

The bill may result in a cost to the Department of Social Services (DSS) as the bill permits DSS to establish and operate an interim care facility pilot program. The bill is not specific as to how the pilot program will function or for how many sites. The bill requires the program, if implemented, to help licensed health care institutions to develop one or more interim care facilities to service up to 100 seniors age 60 and older who fit specific criteria. The bill permits, but does not require DSS, to seek federal funding for the pilot program. The cost to the state will depend on (1) the number of interim care facilities established and the funding, if any, provided to support the projects, (2) the number of people served, (3) the extent to which the state is able to leverage federal funds to support the pilot, and (4) if the program is implemented by DSS.

Lastly, the bill requires DSS to report on the pilot program by July 1, 2016, this does not result in a fiscal impact.

The Out Years

The annualized ongoing fiscal impact identified above would continue into the future subject to inflation.

OLR Bill Analysis**sHB 5541*****AN ACT CONCERNING A PILOT PROGRAM FOR INTERIM CARE FACILITIES.*****SUMMARY:**

This bill allows the Department of Social Services (DSS) commissioner, within available appropriations, to establish and operate an interim care facility pilot program. The program must help licensed health care institutions develop one or more interim care facilities that serve up to 100 seniors age 60 and older who:

1. require access to medical care, prepared meals, and assistance with household tasks and
2. do not require an institutional level of care.

The bill requires the commissioner to give funding priority to a facility proposal that facilitates the department's strategic plan for rebalancing Connecticut's Medicaid long-term care system. It permits the commissioner to seek federal funding for the program, including applying for a Medicaid waiver.

By July 1, 2016, the commissioner must report on the program to the Aging, Appropriations, Human Services, and Public Health committees.

EFFECTIVE DATE: July 1, 2015

DEFINITIONS

The bill defines an "interim care facility" as a facility that provides access to medical care, prepared meals, and assistance with household tasks in a homelike setting (i.e., a private residential unit with a full bathroom). The facility must serve seniors who may have medical

conditions that do not require 24-hour skilled nursing supervision but make it difficult for them to live alone. (This definition is similar to the statutory definition of an assisted living services agency.)

BACKGROUND

Assisted Living Facilities

Assisted living facilities primarily serve adults age 55 and older who need some health or nursing care or assistance with activities of daily living but not the skilled care a nursing home provides. Connecticut does not license these facilities. Instead, it licenses and regulates assisted living services agencies that provide assisted living services.

COMMITTEE ACTION

Aging Committee

Joint Favorable

Yea 12 Nay 1 (03/05/2015)